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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Western District of Virginia

		dern District or virgini		
In re	Steven Keith Smith		Case No	
		Debtor(s)	Chapter	_13
	DISCLOSURE OF COMPEN	NSATION OF ATTO	RNEY FOR I	DEBTOR(S)
(Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filing per rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy	y, or agreed to be pa	id to me, for services rendered or to
	For legal services, I have agreed to accept		\$	4,000.00
	Prior to the filing of this statement I have received			0.00
	Balance Due		_	4,000.00
2.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3.	The source of compensation to be paid to me is:			
	☐ Debtor ☐ Other (specify): By Tru	stee See Exh. A to Form	2030	
4.	■ I have not agreed to share the above-disclosed comp	ensation with any other person	n unless they are me	embers and associates of my law firm
	☐ I have agreed to share the above-disclosed compensations copy of the agreement, together with a list of the name			
5.	In return for the above-disclosed fee, I have agreed to re	nder legal service for all aspec	cts of the bankruptc	y case, including:
ŀ	 a. Analysis of the debtor's financial situation, and rende b. Preparation and filing of any petition, schedules, state c. Representation of the debtor at the meeting of creditor 	ement of affairs and plan whic	ch may be required;	
	d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on how	educe to market value; ex ns as needed; preparatio	cemption planning	g; preparation and filing of
б. I	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any dis any other adversary proceeding.			nces, relief from stay actions or
		CERTIFICATION		
this b	Concerning that the foregoing is a complete statement of any ankruptcy proceeding.	agreement or arrangement for	or payment to me fo	r representation of the debtor(s) in
0	ctober 3, 2016	/s/ Shannon T. M	/lorgan	
D	ate	Shannon T. Mor		_
		Signature of Attorn Tucker Griffin B		
		307 West Rio Ro		
		Charlottesville,	VA 22901	
			Fax: (434) 951-08	370
		SMorgan@TGB	aw.com	
		name oj taw jirm		

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EXHIBIT A TO FORM 2030

Total Funds Paid or to be Paid to Tucker Griffin Barnes PC	\$4,500.00	Total
The above includes the following that has been paid to Tucker Griffin Barnes PC pre-petition:	\$310.00 \$40.00 \$33.00 \$117.00	Bankruptcy Court Filing Fee Credit Counseling & Debtor Education Fees Credit Report To be forwarded to the Chapter 13 Trustee after confirmation of the case
The balance to be paid by the	\$3,850.00 \$150.00	Attorney's Fees Administrative Costs
The balance to be paid by the Chapter 13 Trustee:	\$4,000.00	Attorney's fees and Admin Costs

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Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

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most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

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Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-62009 Doc 1 Filed 10/03/16 Entered 10/03/16 17:40:44 Desc Main Document Page 7 of 55

Fill in this information to identify your case:							
Debtor 1	Steven Keith Smith						
Debtor 2 (Spouse, if filing)							
United States B	ankruptcy Court for the: Western District of Virginia						
Case number (if known)							

Check	Check as directed in lines 17 and 21:								
	According to the calculations required by this Statement:								
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).								
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).								
☐ 3. The commitment period is 3 years.									
	4. The commitment period is 5 years.								

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

auui	tional pages, write your name and case number (ii i	chown).						
Par	Calculate Your Average Monthly Income							
1.	What is your marital and filing status? Check one of	only.						
	■ Not married. Fill out Column A, lines 2-11.							
	☐ Married. Fill out both Columns A and B, lines 2-11							
1 th	ill in the average monthly income that you received from al 01(10A). For example, if you are filing on September 15, the 6- he 6 months, add the income for all 6 months and divide the tot bouses own the same rental property, put the income from that	month perional by 6. Fill i	od would in the re	be March 1 throusult. Do not include	ugh August de any inco	31. If the amome amount m	ount of your monthly incom- ore than once. For exampl	e varied during e, if both
					Column Debtor 1		Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime payroll deductions).	, and con	nmissio	ons (before all	\$	6,376.00	\$	
3.	Alimony and maintenance payments. Do not includ Column B is filled in.	e paymen	ts from	a spouse if	\$	0.00	\$	
4.	All amounts from any source which are regularly p of you or your dependents, including child suppor from an unmarried partner, members of your househo and roommates. Include regular contributions from a filled in. Do not include payments you listed on line 3.	t. Include ld, your de	regulai epende	r contributions ents, parents,	\$	0.00	\$	
5.	Net income from operating a business, profession, or farm	Debtor 1						
	Gross receipts (before all deductions)	\$	0.00					
	Ordinary and necessary operating expenses	-\$	0.00					
	Net monthly income from a business, profession, or fa	rm \$	0.00	Copy here ->	\$	0.00	\$	
6.	Net income from rental and other real property	Debtor 1						
	Gross receipts (before all deductions)	\$	0.00					
	Ordinary and necessary operating expenses	-\$	0.00					
	Net monthly income from rental or other real property	\$	0.00	Copy here ->	\$	0.00	\$	

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Case number (if known)

					Column A Debtor 1		Column B Debtor 2 or non-filing sp	oouse	
7. I r	nterest,	dividends, and royalties			\$	0.00	\$		
8. U	Inemplo	yment compensation			\$	0.00	\$		
		ter the amount if you contend that the amo Security Act. Instead, list it here:	ount received was a ben	efit under					
	For you	J	\$	0.00					
		ır spouse							
		or retirement income. Do not include any oder the Social Security Act.	amount received that w	vas a	\$	0.00	\$		
D re d	o not indeceived	rom all other sources not listed above. Solude any benefits received under the Socials a victim of a war crime, a crime against terrorism. If necessary, list other sources of w.	al Security Act or paymonial Security Act or paymonity, or internation	ents al or					
					\$	0.00	\$		
					\$	0.00	\$		
	-	Total amounts from separate pages, if any.		+	\$	0.00	\$		
11. C	alculate ach colu	your total average monthly income. Admn. Then add the total for Column A to the	ld lines 2 through 10 for e total for Column B.	\$	6,376.00	+ \$_		= \$	6,376.00
12. C	ору уо	rtotal average monthly income from line the marital adjustment. Check one:						\$	6,376.00
13.	_	are not married. Fill in 0 below.							
_	_	are married and your spouse is filing with	vou Fill in 0 below						
	_	are married and your spouse is not filing w							
	Fill i	n the amount of the income listed in line 11 endents, such as payment of the spouse's	, Column B, that was N						
		w, specify the basis for excluding this inconstments on a separate page.	me and the amount of ir	ncome dev	oted to each	purpose.	If necessary, li	ist addit	ional
	If thi	s adjustment does not apply, enter 0 below	<i>I</i> .	_					
				_ \$		-			
				_ Ψ +\$		-			
						_			
		Total		\$	0.00	Co	py here=>		0.00
14.	Your cu	rrent monthly income. Subtract line 13 f	rom line 12.					\$	6,376.00
15.	Calcula	te your current monthly income for the	year. Follow these step	s:					C 27C 22
	15a. C	opy line 14 here=>						\$	6,376.00
	М	ultiply line 15a by 12 (the number of month	ns in a year).					X	12
	15b. TI	ne result is your current monthly income for	r the year for this part of	the form.				\$	76,512.00

Steven Keith Smith

Debtor 1

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Debt	or 1	Steven Keith Smith			Case number (if known)		
16	. Cal	culate the median family income that applies to	you. Fol	low these st	eps:		
	16a	Fill in the state in which you live.		VA	-		
	16h	Fill in the number of people in your household.		1			
		Fill in the median family income for your state and	I size of h		-	¢	55,055.00
	100	To find a list of applicable median income amount instructions for this form. This list may also be available.	ts, go onl	ine using the		Φ.	
17	. Hov	do the lines compare?					
	17a	Line 15b is less than or equal to line 16c. 0 11 U.S.C. § 1325(b)(3). Go to Part 3. Do I					
	17b	■ Line 15b is more than line 16c. On the top 1325(b)(3). Go to Part 3 and fill out Calc your current monthly income from line 14 a	ulation				
Par	t 3:	Calculate Your Commitment Period Under 11	U.S.C.	§ 1325(b)(4)			
18.	Cop	y your total average monthly income from line	11 .			\$	6,376.00
19.	con	uct the marital adjustment if it applies. If you are end that calculating the commitment period under use's income, copy the amount from line 13.	e married 11 U.S.C	d, your spou :. § 1325(b)(se is not filing with you, and you 4) allows you to deduct part of your		
	19a	If the marital adjustment does not apply, fill in 0 or	n line 19a	а.		-\$	0.00
	19b	Subtract line 19a from line 18.				\$_	6,376.00
20.	Cal	culate your current monthly income for the year	r. Follow	these steps	:		
	20a	Copy line 19b				\$_	6,376.00
		Multiply by 12 (the number of months in a year).					x 12
	20b	The result is your current monthly income for the y	year for t	his part of th	ne form	\$	76,512.00
	20c	Copy the median family income for your state and	d size of h	nousehold fr	om line 16c	\$	55,055.00
	04	How do the lines command					
	21.	How do the lines compare?					
		Line 20b is less than line 20c. Unless otherw period is 3 years. Go to Part 4.	ise order	red by the co	ourt, on the top of page 1 of this forn	n, check box 3,	The commitment
		Line 20b is more than or equal to line 20c. U commitment period is 5 years. Go to Part 4.	Inless oth	nerwise orde	red by the court, on the top of page	1 of this form,	check box 4, The
Par	t 4:	Sign Below					
	By s	igning here, under penalty of perjury I declare that	the infor	mation on th	is statement and in any attachments	s is true and co	rrect.
)	(/s/	Steven Keith Smith					
Í	St	even Keith Smith		_			
	•	nature of Debtor 1					
	Date	• October 3, 2016 MM / DD / YYYY					
	If yo	u checked 17a, do NOT fill out or file Form 122C-2	2.				
	If yo	u checked 17b, fill out Form 122C-2 and file it with	this form	n. On line 39	of that form, copy your current mon	thly income fro	m line 14 above.

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Fill in this information to identify your case:	
Debtor 1 Steven Keith Smith	
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the: Western District of Virginia	
Case number(if known)	☐ Check if this is an amended filing
Official Form 122C-2 Chapter 13 Calculation of Your Disposable	Income 04/16
To fill out this form, you will need your completed copy of <i>Chapter 13 Staten Commitment Period</i> (Official Form 122C-1).	nent of Your Current Monthly Income and Calculation of
Be as complete and accurate as possible. If two married people are filing tog space is needed, attach a separate sheet to this form, Include the line number additional pages, write your name and case number (if known). Part 1: Calculate Your Deductions from Your Income	
The Internal Revenue Service (IRS) issues National and Local Standards the questions in lines 6-15. To find the IRS standards, go online using the information may also be available at the bankruptcy clerk's office. Deduct the expense amounts set out in lines 6-15 regardless of your actual expense.	e link specified in the separate instructions for this form. This
expenses if they are higher than the standards. Do not include any operating e 122C–1, and do not deduct any amounts that you subtracted from your spouse	xpenses that you subtracted from income in lines 5 and 6 of Form
If your expenses differ from month to month, enter the average expense.	
Note: Line numbers 1-4 are not used in this form. These numbers apply to info	rmation required by a similar form used in chapter 7 cases.
5. The number of people used in determining your deductions from inc	ome
Fill in the number of people who could be claimed as exemptions on your plus the number of any additional dependents whom you support. This nu the number of people in your household.	
National Standards You must use the IRS National Standards to ans	swer the questions in lines 6-7.
 Food, clothing, and other items: Using the number of people you entered Standards, fill in the dollar amount for food, clothing, and other items. 	ed in line 5 and the IRS National \$
7. Out-of-pocket health care allowance: Using the number of people you the dollar amount for out-of-pocket health care. The number of people is speople who are 65 or olderbecause older people have a higher IRS allow higher than this IRS amount, you may deduct the additional amount on line	split into two categoriespeople who are under 65 and wance for health car costs. If your actual expenses are

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ebtor 1	Steven Keith Smith		Case number (if ki	nown)	
People	who are under 65 years of age				
7a.	Out-of-pocket health care allowance per person	\$ 54			
7b.	Number of people who are under 65	X 1	-		
7c.	Subtotal. Multiply line 7a by line 7b.	\$ 54.00	Copy here=>	\$54.00	
People	who are 65 years of age or older				
7d.	Out-of-pocket health care allowance per person	\$ 130			
7e.	Number of people who are 65 or older	x 0	-		
7f.	Subtotal. Multiply line 7d by line 7e.	\$ 0.00	Copy here=>	\$	
7g.	Total. Add line 7c and line 7f		\$54.00	Copy total here=	> \$54.00_
l ocal S	tandards You must use the IRS Local Standards t	o answer the guesti	one in lines 8-15		
	on information from the IRS, the U.S. Trustee Pro	·		for housing for	
	of miorination from the ik3, the 0.3. Trustee Prootcy purposes into two parts:	gram nas divided t	ne iko Locai Standard	for flousing for	
■ Hous	sing and utilities - Insurance and operating exper	ises			
■ Hous	sing and utilities - Mortgage or rent expenses				
	ver the questions in lines 8-9, use the U.S. Truste				specified in the
	e instructions for this form. This chart may also I using and utilities - Insurance and operating exp				
	he dollar amount listed for your county for insurance			\$	462.00
9. Ho	using and utilities - Mortgage or rent expenses:				
9a.	Using the number of people you entered in line 5, listed for your county for mortgage or rent expense		unt	\$1,033.00	
9b.	Total average monthly payment for all mortgages a	and other debts secu	ured by your home.		
	To calculate the total average monthly payment, a contractually due to each secured creditor in the 6 for bankruptcy. Next divide by 60.				
	Name of the creditor	Average mo payment	nthly		
	-NONE-	\$\$			
	9b. Total average monthly paymen	nt \$	0.00 Copy here=> -:	\$0.00	Repeat this amount on line 33a.
9c.	Net mortgage or rent expense.				
	Subtract line 9b (total average monthly payment) for rent expense). If this number is less than \$0, en		ge \$	1,033.00 Copy	> \$1,033.00
	ou claim that the U.S. Trustee Program's division ects the calculation of your monthly expenses, file			s incorrect and	\$
F	xplain why:				

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Debtor 1	Steven Keith Smith		Case number (if known)		
11.	Local transportation expenses: Check the number of vehic	cles for which you clain	n an ownership or operati	ng expense.	
	□ 0. Go to line 14.				
	■ 1. Go to line 12.				
	2 or more. Go to line 12.				
	Vehicle operation expense: Using the IRS Local Standards				220.00
	operating expenses, fill in the Operating Costs that apply for	,	•		220.00
	Vehicle ownership or lease expense: Using the IRS Local You may not claim the expense if you do not make any loan more than two vehicles.				
Vel	Describe Vehicle 1: 2014 Ford Focus 48,00	0 miles NADA: \$11	,625.00		
13a.	Ownership or leasing costs using IRS Local Standard		\$ 471.00	-	
13b.	Average monthly payment for all debts secured by Vehicle 1			-	
	Do not include costs for leased vehicles.				
	To calculate the average monthly payment here and on line are contractually due to each secured creditor in the 60 mon bankruptcy. Then divide by 60.		nat		
	Name of each creditor for Vehicle 1	Average monthly payment			
	BB & T	\$ 371.05	-		
	Total Average Monthly Payment	\$ 371.05	Copy here => -\$3	71.05 Repeat this amount on line 33b.	
13c.	Net Vehicle 1 ownership or lease expense			Copy net Vehicle 1	
	Subtract line 13b from line 13a. if this number is less than \$0	, enter \$0	s\$	expense here => \$	99.95
Vel	nicle 2 Describe Vehicle 2:			-	
13d.	Ownership or leasing costs using IRS Local Standard		\$0.00	-	
13e.	Average monthly payment for all debts secured by Vehicle 2 leased vehicles.	. Do not include costs f	or		
	Name of each creditor for Vehicle 2	Average monthly payment			
		\$			
	Total average monthly payment	\$	Copy here => -\$0	Repeat this amount on line 33c.	
13f.	Net Vehicle 2 ownership or lease expense			Copy net	
	Subtract line 13e from line 13d. if this number is less than \$0	, enter \$0	\$0.00	Vehicle 2 expense here => \$	0.00
14.	Public transportation expense: If you claimed 0 vehicles Public Transportation expense allowance regardless of			in the	0.00
	Additional public transportation expense: If you claimed also deduct a public transportation expense, you may fill in who to claim more than the IRS Local Standard for <i>Public Trans</i>	hat you believe is the a			0.00

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Case number (if known)

er Necessary Expenses	In addition to the expense	doduction	a listed shows	you are allowed your monthly expense	o for	
er Necessary Expenses			is listed above	, you are allowed your monthly expense	S IOI	
5. Taxes: The total monthly amount that you will actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes.						
Do not include real estate,	sales, or use taxes.				\$	1,460.00
contributions, union dues,	and uniform costs.				\$	46.00
	, , ,		•	• • • • • • • • • • • • • • • • • • • •		
filing together, include payers Do not include premiums for	ments that you make for you or life insurance on your dep	ur spouse'	s term life insu	rance.	\$	0.00
				by the order of a court or		
Do not include payments of	n past due obligations for sp	pousal or	child support.	· ·	\$	0.00
_		education	n that is either	required:		
_			a a sanda Paradona	article to a conflict to the start of a conflict	e	0.00
			•			0.00
Do not include payments for	or any elementary or second	dary school	ol education.		\$	0.00
by a health savings accour	nt. Include only the amount t	that is mo	re than the tota	al entered in line 7.	æ	0.00
•	· ·			•	Ф	0.00
3. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted.						
	allowed under the IRS exp	ense allo	wances.		\$	3,944.95
litional Expense Deduction						
					or	
Health insurance		\$	232.00			
Disability insurance		\$	0.00			
Health savings account		+ \$	0.00	_		
Total		\$	232.00	Copy total here=>	\$	232.00
_ ' ' '				_		
Yes		\$				
continue to pay for the reasyour household or member	sonable and necessary care r of your immediate family w	e and supp tho is una	oort of an elder ble to pay for s	ly, chronically ill, or disabled member of such expenses. These expenses may	\$	0.00
27. Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the						
				nses that you incur to maintain the es Act or other federal laws that apply.		
	self-employment taxes, so your pay for these taxes. Hand subtract that number for Do not include real estate, Involuntary deductions: contributions, union dues, and point include amounts that Life Insurance: The total of filing together, include paying Do not include premiums for life insurance other than Court-ordered payments: administrative agency, such Do not include payments of life insurance other than Court-ordered payments of life insurance other than Court-ordered payments of life insurance other than Court-ordered payments of life insurance. The total monted as a condition for your justification. The total monted life insurance of life insurance, disability insurance of life in	Taxes: The total monthly amount that you will actually self-employment taxes, social security taxes, and Medyour pay for these taxes. However, if you expect to recand subtract that number from the total monthly amound not include real estate, sales, or use taxes. Involuntary deductions: The total monthly payroll decontributions, union dues, and uniform costs. Do not include amounts that are not required by your juffiling together, include payments that you make for you not include premiums for life insurance on your detail of life insurance other than term. Court-ordered payments: The total monthly amount administrative agency, such as spousal or child suppodo not include payments on past due obligations for seducation: The total monthly amount that you pay for as a condition for your job, or for your physically or mentally challenged depende Childcare: The total monthly amount that you pay for Do not include payments for any elementary or second Additional health care expenses, excluding insural that is required for the health and welfare of you or you by a health savings account. Include only the amount Payments for health insurance or health savings account. Province if it is not reimbursed by your employer. Optional telephone and telephone services: The tof or you and your dependents, such as pagers, call wai phone service, to the extent necessary for your health income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, in expenses, such as those reported on line 5 of Official Add all of the expenses allowed under the IRS exp Add lines 6 through 23. Itional Expense Deductions These are additional Note: Do not include Health insurance, disability insurance, and health insurance, disability insurance, and health savings account Total Do you actually spend this total amount? No. How much do you actually spend? Yes Continued contributions to the care of household continue to pay for the reasonable and necessary care your household or member of your immedi	self-employment taxes, social security taxes, and Medicare taxe your pay for these taxes. However, if you expect to receive a tax and subtract that number from the total monthly amount that is woo not include real estate, sales, or use taxes. Involuntary deductions: The total monthly payroll deductions to contributions, union dues, and uniform costs. Do not include amounts that are not required by your job, such a Life Insurance: The total monthly premiums that you pay for you filing together, include payments that you make for your spoused Do not include premiums for life insurance on your dependents, of life insurance other than term. Court-ordered payments: The total monthly amount that you padministrative agency, such as spousal or child support payment Do not include payments on past due obligations for spousal or Education: The total monthly amount that you pay for education as a condition for your job, or for your physically or mentally challenged dependent child if Childcare: The total monthly amount that you pay for childcare, Do not include payments for any elementary or secondary school Additional health care expenses, excluding insurance costs that is required for the health and welfare of you or your dependents that is required for the health and welfare of you or your dependents, such as pagers, call waiting, calle phone service, to the extent necessary for your health and welfare income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and expenses, such as those reported on line 5 of Official Form 122 of Add all of the expenses allowed under the IRS expense allowed the sability insurance, and health savings accounts that your dependents. Health insurance Biosability insurance, and health savings accounts that your dependents. Health insurance for the reasonable and necessary care and supy our household or member of your immediate family who is una your household or member of your immediate family who is una your household or member of yo	Taxes: The total monthly amount that you will actually pay for federal, state an self-employment taxes, social security taxes, and Medicare taxes. You may incy your pay for these taxes. However, if you expect to receive a tax refund, your and subtract that number from the total monthly amount that is withheld to pay Do not include real estate, sales, or use taxes. Involuntary deductions: The total monthly payroll deductions that your job recontributions, union dues, and uniform costs. Do not include amounts that are not required by your job, such as voluntary 40 Life Insurance: The total monthly premiums that you pay for your own term liff illing together, include payments that you make for your spouse's term life insurance other than term. Court-ordered payments: The total monthly amount that you pay as required administrative agency, such as spousal or child support payments. Do not include payments on past due obligations for spousal or child support. Education: The total monthly amount that you pay for education that is either as a condition for your job, or for your physically or mentally challenged dependent child if no public educ Childcare: The total monthly amount that you pay for childcare, such as babys Do not include payments for any elementary or secondary school education. Additional health care expenses, excluding insurance costs: The monthly that is required for the health and welfare of you or your dependents and that it by a health savings account. Include only the amount that is more than the total Payments for health insurance or health savings accounts should be listed only on the payments for health insurance or health savings accounts should be listed only on the payments for health insurance or health savings accounts that are reasonably your and your dependents, such as pagers, call waiting, caller identification, phone service, to the extent necessary for your health and welfare or that of you insurance, disability insurance, and health savings accounts that are reasonably your d	Taxes: The total monthly amount that you will actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for those taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs. Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings. Life Insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. Court-ordered payments: The total monthly amount that you pay for education that is either required: ■ as a condition for your job, or ■ for your physically or mentally challenged dependent child if no public education is available for similar services. Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. Do not include payments for any elementary or secondary school education. Additional health care expenses, excluding insurance consts: The monthly amount that you pay for health care that is required for the health and welfare of you or your depende	Taxes: The total monthly amount that you will actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs. Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings. Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings. Life Insurance: The total monthly premiums that you pay for your own term life insurance. It wo married people are filing together, include payments that you make for your spouse's term life insurance. Do not include payments that you make for your spouse's term life insurance. Do not include payments: The total monthly amount that you pay as required by the order of a court or administrative as spousal or child support payments. Do not include payments: The total monthly amount that you pay for education that is either required: ■ for your physically or mentally challenged dependent child if no public education is available for similar services. Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line ? Payments for health insurance or health savings accounts should be listed only in line 25. Do not include payment

Steven Keith Smith

Debtor 1

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	Steven Keith Smith	Case number (if known)			
28.	Additional home energy costs. Your hom line 8.	e energy costs are included in your insurance and operating expenses	on		
	If you believe that you have home energy c 8, then fill in the excess amount of home er	osts that are more than the home energy costs included in expenses or nergy costs	n line		
	You must give your case trustee document amount claimed is reasonable and necessary	ation of your actual expenses, and you must show that the additional ary.		\$	0.00
29.		Iren who are younger than 18. The monthly expenses (not more than ependent children who are younger than 18 years old to attend a private			
	You must give your case trustee document claimed is reasonable and necessary and r	ation of your actual expenses, and you must explain why the amount not already accounted for in lines 6-23.			
	* Subject to adjustment on 4/01/19, and ever	ery 3 years after that for cases begun on or after the date of adjustment	t.	\$	0.00
30.		he monthly amount by which your actual food and clothing expenses ar allowances in the IRS National Standards. That amount cannot be mo s in the IRS National Standards.			
		ional allowance, go online using the link specified in the separate so be available at the bankruptcy clerk's office.			
	You must show that the additional amount of	claimed is reasonable and necessary.		\$	0.00
31.	Continuing charitable contributions. The instruments to a religious or charitable orga	e amount that you will continue to contribute in the form of cash or financianization. 11 U.S.C. § 548(d)(3) and (4).	cial		
	Do not include any amount more than 15%	of your gross monthly income.		\$	0.00
32.	Add all of the additional expense deduct Add lines 25 through 31.	tions.		\$	232.00
Ded	uctions for Debt Payment				
	For debts that are secured by an interest oans, and other secured debt, fill in lines	in property that you own, including home mortgages, vehicle			
		33a through 33e.			
		ent, add all amounts that are contractually due to each secured			
	Γο calculate the total average monthly paym	ent, add all amounts that are contractually due to each secured		Average paymer	e monthly
	To calculate the total average monthly paym creditor in the 60 months after you file for ba Mortgages on your home	ent, add all amounts that are contractually due to each secured nkruptcy. Then divide by 60.	ķ		
(Fo calculate the total average monthly paym creditor in the 60 months after you file for ba Mortgages on your home	ent, add all amounts that are contractually due to each secured nkruptcy. Then divide by 60.	ķ	oaymer	nt
(Fo calculate the total average monthly paym creditor in the 60 months after you file for ba Mortgages on your home Copy line 9b here Loans on your first two vehicles	ent, add all amounts that are contractually due to each secured nkruptcy. Then divide by 60.	ķ	oaymer	nt
33a.	Fo calculate the total average monthly paym creditor in the 60 months after you file for ba Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here	ent, add all amounts that are contractually due to each secured nkruptcy. Then divide by 60. =	=> 3	oaymer	0.00
33a. 33b.	Fo calculate the total average monthly paym creditor in the 60 months after you file for ba Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here	ent, add all amounts that are contractually due to each secured nkruptcy. Then divide by 60.	=> 3	Saymer	0.00 371.05
33a. 33b. 33c. 33d.	To calculate the total average monthly paym creditor in the 60 months after you file for ba Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here	ent, add all amounts that are contractually due to each secured nkruptcy. Then divide by 60. =	=> 3 => 3 => 3	Saymer	0.00 371.05
33a. 33b. 33c. 33d.	To calculate the total average monthly paymoreditor in the 60 months after you file for ba Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts:	ent, add all amounts that are contractually due to each secured nkruptcy. Then divide by 60. Contractually due to each secured nkruptcy. Then divide by 60. Contractually due to each secured nkruptcy. Then divide by 60.	=> 3 => 3 => 3	Saymer	0.00 371.05
33a. 33b. 33c. 33d.	To calculate the total average monthly paymoreditor in the 60 months after you file for ba Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts:	ent, add all amounts that are contractually due to each secured nkruptcy. Then divide by 60. Identify property that secures the debt Does paymer include taxes or insurance?	=> 3 => 3 => 3	\$\$	0.00 371.05
33a. 33b. 33c. 33d.	To calculate the total average monthly paymoreditor in the 60 months after you file for bath Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: The of each creditor for other secured debt	ent, add all amounts that are contractually due to each secured nkruptcy. Then divide by 60. Identify property that secures the debt Does paymer include taxes or insurance? No Yes	=> 3 => 3 => 3	\$\$	0.00 371.05
33a. 33b. 33c. 33d.	To calculate the total average monthly paymoreditor in the 60 months after you file for bath Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: The of each creditor for other secured debt	ent, add all amounts that are contractually due to each secured nkruptcy. Then divide by 60. Identify property that secures the debt Does paymer include taxes or insurance? No Yes No	=> 3 => 3 => 3	\$\$	0.00 371.05
33a. 33b. 33c. 33d.	To calculate the total average monthly paymoreditor in the 60 months after you file for bath Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: The of each creditor for other secured debt	ent, add all amounts that are contractually due to each secured nkruptcy. Then divide by 60. Identify property that secures the debt Does paymer include taxes or insurance? No Yes	=> 3 => 3 => 3	S	0.00 371.05
33a. 33b. 33c. 33d.	To calculate the total average monthly paymoreditor in the 60 months after you file for bath Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: The of each creditor for other secured debt	ent, add all amounts that are contractually due to each secured nkruptcy. Then divide by 60. Identify property that secures the debt Does paymer include taxes or insurance? No Yes No	=> \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	S	0.00 371.05
33a. 33b. 33c. 33d.	To calculate the total average monthly paymoreditor in the 60 months after you file for bath Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: The of each creditor for other secured debt	ent, add all amounts that are contractually due to each secured nkruptcy. Then divide by 60. Identify property that secures the debt Does paymer include taxes or insurance? No Yes No Yes No Yes No No No No No No No N	=> \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	S	0.00 371.05
33a. 33b. 33c. 33d.	To calculate the total average monthly paymoreditor in the 60 months after you file for bath Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: The of each creditor for other secured debt	ent, add all amounts that are contractually due to each secured nkruptcy. Then divide by 60. Identify property that secures the debt Does paymer include taxes or insurance? No Yes No Yes No No No No No No No N	=> \$ \$ \$ \$ \$ \$ \$ \$ \$	S	0.00 371.05

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Debtor 1	Stev	en Keith Smith			Cas	e nu	umber (if known)			
		debts that you listed in lin property necessary for yo				∍,				
	l No.	Go to line 35.								
	Yes.	State any amount that you listed in line 33, to keep po Next, divide by 60 and fill it	ssession of your proper	ty (called the <i>ci</i>						
Name	e of the	creditor	Identify property that	secures the debt		To	tal cure amount		Monthly	
-NO	NE-				\$			÷ 60 = 3		
						_				
					Total	\$	0.00	total here	•	0.00
		owe any priority claims - s due as of the filing date o				nat				
	l No.	_	. ,							
	Yes.	Fill in the total amount of a ongoing priority claims, such			e current or					
		Total amount of all past-of	ue priority claims			\$	2.00	÷ 6	0 \$_	0.04
36. Pr	ojecte	d monthly Chapter 13 plar	payment			\$	300.00	_		
Of the To	fice of e Exec find a li	nultiplier for your district as a the United States Courts (fourtive Office for United States at of district multipliers that inclustructions for this form. This lis	r districts in Alabama ar s Trustees (for all other ides your district, go online	nd North Carolir districts). using the link spe	na) or by	X .	10.00			
A۱	/erage	monthly administrative expe	ense				\$30.00	Copy to		30.00
		of the deductions for deb as 33e through 36.	t payment.						\$	401.09
Total	Deduc	tions from Income								
38. A c	dd all c	of the allowed deductions.								
		e 24, All of the expenses ale allowances	lowed under IRS	\$	3,944.95	5				
C	Copy lin	e 32, All of the additional ex			232.00)_				
C	Copy lin	e 37, All of the deductions t	or debt payment	+\$	401.09					
Т	otal de	eductions		\$	4,578.04	ļ	Copy total here=	>	\$	4,578.04

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ebtor 1	Steven Keith Smith Case					nber (if known)		
art 2:	Determine Yo	ur Disposable Income Under 11 U.S.C. § 1	325(b)(2)				
		rrent monthly income from line 14 of Form Current Monthly Income and Calculation o					\$	6,376.00
ch dis red	ildren. The month ability payments beived in accorda	bly necessary income you receive for support payments, for a dependent child, reported in Part I of Fornce with applicable nonbankruptcy law to the ended for such child.	ster c m 12	are payments, or 2C-1, that you	\$; 0	.00	
em in	nployer withheld fo	retirement deductions. The monthly total of om wages as contributions for qualified retire ()(7) plus all required repayments of loans from C. § 362(b)(19).	ment	plans, as specified	\$	276	.00	
42. To	tal of all deducti	ons allowed under 11 U.S.C. § 707(b)(2)(A)	. Сор	y line 38 here=	> \$	4,578	.04	
ex the	penses and you heir expenses. You	cial circumstances. If special circumstances ave no reasonable alternative, describe the smust give your case trustee a detailed explandocumentation for the expenses.	pecia	l circumstances and	d			
Descri	ibe the special c	ircumstances		Amount of expe	nse			
				\$		_		
				\$		_		
				\$		_		
		Tota	I \$_	0.00		ppy re=> \$	0.0	00
44. To	tal adjustments.	Add lines 40 through 43.		=> [\$	4,854.04	Copy here=>	-\$ 4,854.04
45. C a	·	nthly disposable income under § 1325(b)(2). Sul	otract line 44 from li	ine 3	99.	\$	1,521.96
ha tim yo	ve changed or are ne your case will b u filed your petitio	or expenses. If the income in Form 122C-1 or virtually certain to change after the date you be open, fill in the information below. For exan n, check 122C-1 in the first column, enter line I in when the increase occurred, and fill in the	filed nple, i 2 in	your bankruptcy pe f the wages reporte the second column,	tition d in	n and during the creased after		
Form	Line	Reason for change		Date of change		Increase or decrease?	Amou	nt of change
☐ 122 ☐ 122 ☐ 122 ☐ 122 ☐ 122 ☐ 122 ☐ 122	C-2 C-1 C-2 C-1					☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Increase ☐ Increase ☐ Increase ☐ Increase ☐ Increase	\$ \$ \$	

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Debtor 1	Steven Keith Smith	Case number (if known)
Part 4:	Sign Below	
E	By signing here, under penalty of perjury you declare that the inf	ormation on this statement and in any attachments is true and correct.
_	/s/ Steven Keith Smith	
	Steven Keith Smith Signature of Debtor 1	
	October 3, 2016	
	MM / DD / YYYY	

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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
WESTERN DISTRICT OF VIRGINIA	-	
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Steven First name Keith Middle name Smith Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7910	

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Del	otor 1 Steven Keith Smit	h	Case number (if known)			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		☐ I have not used any business name or EINs. PDBA Lydia Mountain Country Store	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live	1333 Middle River Road	If Debtor 2 lives at a different address:			
		Stanardsville, VA 22973 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Greene				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		PO Box 52 Ruckersville, VA 22968				
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	 Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. 			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Case 16-62009 Doc 1 Filed 10/03/16 Entered 10/03/16 17:40:44 Desc Main Document Page 20 of 55 Debtor 1 Steven Keith Smith Case number (if known) Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under ☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. District When Case number When District Case number When District Case number 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you When Case number, if known District Debtor Relationship to you When District Case number, if known 11. Do you rent your Go to line 12. No. residence? Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? ☐ Yes. No. Go to line 12.

bankruptcy petition.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this

Case 16-62009 Doc 1 Filed 10/03/16 Entered 10/03/16 17:40:44 Desc Main Document Page 21 of 55 Debtor 1 Steven Keith Smith Case number (if known) Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor Go to Part 4. of any full- or part-time No. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ■ No. U.S.C. § 101(51D). ☐ Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs immediate attention? needed, why is it needed? For example, do you own perishable goods, or livestock that must be fed, Where is the property? or a building that needs

Number, Street, City, State & Zip Code

urgent repairs?

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Debtor 1 Steven Keith Smith Case number (if known)

Part 5: Explain Your Efforts to Receiv

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 16-62009 Doc 1 Filed 10/03/16 Entered 10/03/16 17:40:44 Desc Main Document Page 23 of 55 Steven Keith Smith Case number (if known) **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. State the type of debts you owe that are not consumer debts or business debts 16c. 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses □ No are paid that funds will □ Yes be available for distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to **□** \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? **\$100,001 - \$500,000** □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ☐ More than \$50 billion ■ \$500,001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? **\$100,001 - \$500,000** □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this

Part 7:

For you

Debtor 1

Part 6:

document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11. United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Steven Keith Smith Signature of Debtor 2 Steven Keith Smith Signature of Debtor 1 Executed on October 3, 2016 Executed on

MM / DD / YYYY

MM / DD / YYYY

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Debtor 1 Steven Keith Smi	th	Case	Case number (if known)			
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, United	States Code, and have e	informed the debtor(s) about eligibility to proceed xplained the relief available under each chapter lebtor(s) the notice required by 11 U.S.C. § 342(b)			
If you are not represented by an attorney, you do not need to file this page.	and, in a case in which § 707(b)(4)(D) applies, schedules filed with the petition is incorrect.	certify that I have no know	ledge after an inquiry that the information in the			
	/s/ Shannon T. Morgan	Date	October 3, 2016			
	Signature of Attorney for Debtor		MM / DD / YYYY			
	Shannon T. Morgan Printed name					
	Tucker Griffin Barnes PC					
	Firm name					
	307 West Rio Road					
	Charlottesville, VA 22901					
	Number, Street, City, State & ZIP Code					
	Contact phone (434) 973-7474	Email address	SMorgan@TGBlaw.com			
	84978					
	Bar number & State					

Case 16-62009 Doc 1

Fill	in this infor	mation to identify your	case:			
Del	otor 1	Steven Keith Smi	ith			
Del	otor 2	First Name	Middle Name	Last Name		
	ouse if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Ba	ankruptcy Court for the:	WESTERN DISTRICT	OF VIRGINIA		
Cas	se number					
(if kn	nown)				_	ck if this is an
					ame	nded filing
\sim t	ficial Fa	4000				
		orm 106Sum	and Liabilities a	nd Certain Statistical Information		12/15
Be a info you	as complete rmation. Fill r original for	and accurate as possib out all of your schedul	ole. If two married peoples first; then complete	e are filing together, both are equally responsible the information on this form. If you are filing amer ck the box at the top of this page.	for supplyi	ing correct
	<u> </u>				Vour	assets
						of what you own
1.		VB: Property (Official Fo			•	205 000 00
	1a. Copy lir	ne 55, Total real estate, f	rom Schedule A/B		\$	395,000.00
	1b. Copy lir	ne 62, Total personal pro	perty, from Schedule A/B		\$	132,603.04
	1c. Copy lir	ne 63, Total of all propert	y on Schedule A/B		\$	527,603.04
Par	t 2: Summ	narize Your Liabilities				
						liabilities
					Amou	nt you owe
2.			laims Secured by Proper mn A, <i>Amount of claim,</i> a	<i>ty</i> (Official Form 106D) t the bottom of the last page of Part 1 of <i>Schedule D</i>	. \$	392,727.00
3.			Unsecured Claims (Offici		•	2.00
			"	ms) from line 6e of <i>Schedule E/F</i>		2.00
	3b. Copy th	ne total claims from Part	2 (nonpriority unsecured	claims) from line 6j of Schedule E/F	\$	12,076.00
				Your total liabilitie	s \$	404,805.00
						101,000.00
Par	t 3: Summ	narize Your Income and	I Expenses			
4.	Schedule I:	Your Income (Official Fo	orm 106I)			
	Copy your o	combined monthly incom	e from line 12 of Schedu	le I	\$	4,379.00
5.		: Your Expenses (Official monthly expenses from li			\$	3,640.00
Par	t 4: Answ	er These Questions for	Administrative and Sta	tistical Records		
6.	Are you fili	ing for bankruptcy und	er Chapters 7, 11, or 13	?		
	☐ No. Yo	ou have nothing to report	on this part of the form.	Check this box and submit this form to the court with y	our other so	chedules.
	Yes					
7.	What kind	of debt do you have?				
				debts are those "incurred by an individual primarily for 9g for statistical purposes. 28 U.S.C. § 159.	or a persona	ıl, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Deb	tor 1	Steven Keith Smith	Case number (if known)	
8.		the Statement of Your Current Monthly Income: Cop -1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 L		\$ 6,376.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	2.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	2.00

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Fill in	this inforr	nation to ide	ntify y	your case and th	is filing	j:					
Debto	r 1	Steven K	Ceith				T. AN				
Debto	r 2	First Name		Middle	Name		Last Name				
(Spouse	e, if filing)	First Name		Middle	Name		Last Name				
United	d States Ba	ınkruptcy Coui	t for t	he: WESTERN	DISTR	ICT OF VIRG	INIA				
Case	number _						_		[Check if this is an amended filing	
		rm 106/									
<u>Scr</u>	nedul	e A/B:	Pr	operty						12/15	
informa	ation. If more every ques	e space is need stion.	ded, a	ttach a separate sh	eet to tl	nis form. On th	e are filing together, both ar e top of any additional page vn or Have an Interest In				
□ N	lo. Go to Par	, ,	or equ	iitable interest in a	ny resid	ence, building,	, land, or similar property?				
1.1					What	is the property	y? Check all that apply				
	1333 Middle River Road Street address, if available, or other description		ription	Duplex or multi-unit building the a			the amount of	not deduct secured claims or exemptions. Put amount of any secured claims on Schedule D: ditors Who Have Claims Secured by Property.			
						Manufactured	or mobile home	Current value	of the	Current value of the	
5	Stanardsv	/ille V	Ά	22973-0000		Land		entire propert	ty?	portion you own?	
C	City	St	ate	ZIP Code		Investment pr Timeshare	operty	\$395 ,	,000.00	\$395,000.00	
						Other				ur ownership interest	
					Who has an interest in the property? Check one a life esta				estate), if known.		
,	Greene					Debtor 1 only		Tenant in (Common		
_	County					Debtor 2 only Debtor 1 and	Debtor 2 only				
					_		f the debtors and another	☐ Check if (see instruc		unity property	
						r information y erty identificati	ou wish to add about this ite on number:	em, such as local	I		
					CTA Curi Note has	e: Debtor ar	00 Price: \$395,000.00 nd his ex-wife are on the listed for sale for 2 y				
							from Part 1, including an			\$395,000.00	

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Document Page 28 of 55 Debtor 1 Steven Keith Smith Case number (if known) 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Ford Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: **Focus** Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2014 Year: Debtor 2 only Current value of the Current value of the 48,000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another NADA: \$11,625.00 \$11,625.00 \$11,625.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$11,625.00 .pages you have attached for Part 2. Write that number here......>> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... 1 Stove, 1 Refrigerator, 1 Dishwasher, 1 Microwave, 1 Washer, 1 Dryer, 1 Recliner Chair, 1 Rocking Chair, 2 Bar Stools, 1 Desk, 1 Coffee Table, 1 Other Table, 1 Nightstand, 1 Dresser, 1 Bed, 3 Lamps, 1 Riding Mower, 1 Tool Box, 2 Power Tools, 1 Set of Lawn Furniture, Miscellaneous Linens, Pots and Pans, Silverware, Cookware, Dishware, Glassware, Utensils, Small Kitchen \$1.815.00 Appliances, and Decor 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... \$50.00 1 Television 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No

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Doc 1

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Desc Main

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Debtor 1	Steven Keith Smith		Case number	(if known)	
☐ Yes.	. Describe				
10. Firear Exam ■ No	ms pples: Pistols, rifles, shotguns, ammuni	tion, and related equipmer	ut		
☐ Yes.	. Describe				
☐ No	es uples: Everyday clothes, furs, leather c Describe	oats, designer wear, shoe	s, accessories		
	Men's Clothing] _	\$500.00
■ No	ry uples: Everyday jewelry, costume jewe Describe	ry, engagement rings, wed	lding rings, heirloom jewelry, watche	s, gems, gold, silve	г
Exam ■ No	arm animals apples: Dogs, cats, birds, horses . Describe				
■ No □ Yes.	ther personal and household items . Give specific information the dollar value of all of your entrie Part 3. Write that number here	s from Part 3, including a	any entries for pages you have atta		\$2,365.00
	escribe Your Financial Assets wn or have any legal or equitable in	terest in any of the follov	ving?	por Do	rent value of the tion you own? not deduct secured ms or exemptions.
☐ No	aples: Money you have in your wallet, i	, ,	,	your petition	
			Cash		\$200.00
Exam	sits of money aples: Checking, savings, or other final institutions. If you have multiple		stitution, list each.	rokerage houses, a	nd other similar
■ Yes.		mstitution	iame.		
	17.1. Checkin	g United B	ank		\$4,500.00
Exam	s, mutual funds, or publicly traded supples: Bond funds, investment account		ney market accounts		
■ No □ Yes.	Institution of	or issuer name:			

Official Form 106A/B Schedule A/B: Property page 3

Case 16-62009 Doc 1 Filed 10/03/16 Entered 10/03/16 17:40:44 Desc Main Page 30 of 55 Document Debtor 1 Steven Keith Smith Case number (if known) 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: **Thrift Saving Plan** \$110,026.09 **Thrift Savings** Pension **United States Postal Service Pension** Unknown 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions.

28. Tax refunds owed to you

■ No

☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years......

Debto	or 1 Steven Keith Smith	Case number (if know	n)
E	amily support Examples: Past due or lump sum alii No	mony, spousal support, child support, maintenance, divorce settlement, prope	rty settlement
	Yes. Give specific information		
E	benefits; unpaid loans yo	insurance payments, disability benefits, sick pay, vacation pay, workers' comp	pensation, Social Security
31. In		nsurance; health savings account (HSA); credit, homeowner's, or renter's insu	rance
		of analynation and list its value	
•	Yes. Name the insurance company Company	ny name: Beneficiary:	Surrender or refund value:
		Term Life Insurance Policy Policy is through Debtor's	
	Emplo	yer	\$1.00
	GPM L	_ife	\$3,884.9
lf s∈		e you from someone who has died rust, expect proceeds from a life insurance policy, or are currently entitled to re	eceive property because
_E	Examples: Accidents, employment d	ner or not you have filed a lawsuit or made a demand for payment lisputes, insurance claims, or rights to sue	
	No Yes. Describe each claim		
		claims of every nature, including counterclaims of the debtor and rights	to set off claims
_	No	cialins of every flature, including counterclaims of the debtor and rights	to set on claims
	Yes. Describe each claim		
	ny financial assets you did not al No	ready list	
	Yes. Give specific information		
		Potential funds due to Debtor unknown at the time of filing, including but not limited to state and federal income tax refunds, possible garnishment funds, lottery proceeds, and inheritance.	\$1.00
		entries from Part 4, including any entries for pages you have attached	\$118,613.04
'	_	<u>)</u>	
Part 5	: Describe Any Business-Related Pro	operty You Own or Have an Interest In. List any real estate in Part 1.	
_		ole interest in any business-related property?	
_	No. Go to Part 6.		
ЦΥ	es. Go to line 38.		

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Debto	r 1	Steven Keith Smith		Case number (if known)	
Part 6		scribe Any Farm- and Commercial Fishing-Related Property Nou own or have an interest in farmland, list it in Part 1.	ou Own or Have an Interes	st In.	
46. D o	you	own or have any legal or equitable interest in any far	m- or commercial fishin	ng-related property?	
	No.	Go to Part 7.			
	Yes.	Go to line 47.			
Part 7	:	Describe All Property You Own or Have an Interest in That	You Did Not List Above		
		have other property of any kind you did not already I bles: Season tickets, country club membership	ist?		
	No				
	Yes.	Give specific information			
54. A		he dollar value of all of your entries from Part 7. Write List the Totals of Each Part of this Form	that number here		\$0.00
55. F	Part 1	: Total real estate, line 2			\$395,000.00
56. F	Part 2	: Total vehicles, line 5	\$11,625.00		
57. F	Part 3	: Total personal and household items, line 15	\$2,365.00		
58. F	Part 4	: Total financial assets, line 36	\$118,613.04		
59. F	Part 5	: Total business-related property, line 45	\$0.00		
60. F	Part 6	: Total farm- and fishing-related property, line 52	\$0.00		
61. F	Part 7	: Total other property not listed, line 54	+ \$0.00		
62. 1	Γotal	personal property. Add lines 56 through 61	\$132,603.04	Copy personal property total	\$132,603.04
63.	Γotal	of all property on Schedule A/B. Add line 55 + line 62			\$527,603.04

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De	btor 1 Steven K	eith Smith						
	First Name		Middle Name	L	ast Name			
	btor 2 ouse if, filing) First Name		Middle Name	L	_ast Name			
	ited States Bankruptcy Cour	t for the: WE	STERN DISTRICT OF V	'IRGIN	NIA			
					·			
	nown)						Check if this is an amended filing	
Oí	fficial Form 1060	;				_		
S	chedule C: Th	e Prope	erty You Cla	aim	as Exempt		4/16	
the nee cas	property you listed on Schedded, fill out and attach to this e number (if known).	dule A/B: Proper s page as many	ty (Official Form 106A/B) copies of <i>Part 2: Additio</i>	as yo nal Pa	ther, both are equally responsible for our source, list the property that you age as necessary. On the top of any	claim as ex additional p	empt. If more space is pages, write your name and	
spe any fun exe	ecific dollar amount as exe applicable statutory limit. ds—may be unlimited in d	mpt. Alternative Some exemption ollar amount. H ar amount and	ely, you may claim the foots—such as those for owever, if you claim ar	full fai r heal n exen	ount of the exemption you claim. ir market value of the property be th aids, rights to receive certain be aption of 100% of fair market valu determined to exceed that amoun	ing exempt enefits, and le under a l	ted up to the amount of d tax-exempt retirement aw that limits the	
Pa	rt 1: Identify the Proper	y You Claim as	Exempt					
1.	Which set of exemptions	are you claimin	g? Check one only, eve	n if yo	our spouse is filing with you.			
	You are claiming state a	nd federal nonba	ankruptcy exemptions.	11 U.S	S.C. § 522(b)(3)			
	☐ You are claiming federa	exemptions. 1	1 U.S.C. § 522(b)(2)					
2.	For any property you list	on Schedule A/	/B that you claim as exe	empt,	fill in the information below.			
	Brief description of the proposchedule A/B that lists this p		Current value of the portion you own	Am	ount of the exemption you claim	Specific la	ws that allow exemption	
			Copy the value from Schedule A/B	Che	eck only one box for each exemption.			
	1333 Middle River Roa		\$395,000.00	•	\$1.00	Va. Code	e Ann. § 34-4	
	Stanardsville, VA 2297 County Tax Map No.: 20 A 6E CTA: \$408,700.00 Current Listing Price: Note: Debtor and his ethe Deed to the real eshas had th home listed	\$395,000.00 x-wife are on tate. Debtor			100% of fair market value, up to any applicable statutory limit			
	year Line from Schedule A/B: 1.	1						
	2014 Ford Focus 48,00	0 miles	\$11,625.00		\$0.00	Va. Code	e Ann. § 34-26(8)	
	NADA: \$11,625.00 Line from Schedule A/B: 3.	1			100% of fair market value, up to any applicable statutory limit			
	1 Stove, 1 Refrigerator		\$1,815.00		\$1,815.00	Va. Code	e Ann. § 34-26(4a)	

1 Dryer, 1 Recliner Chair, 1 Rocking Chair, 2 Bar Stools, 1 Desk, 1 Coffee Table, 1 Other Table, 1 Nightstand, 1 Dresser, 1 Bed, 3 Lamps, 1 Riding Mower, 1 Tool Box, 2 Power Tools, 1 Set of Lawn

 \square 100% of fair market value, up to

any applicable statutory limit

Line from Schedule A/B: 6.1

Official Form 106C

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De	ebtor 1 Steven Keith Smith			Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	1 Television Line from Schedule A/B: 7.1	\$50.00		\$50.00	Va. Code Ann. § 34-26(4a)
	Line Holli Schedule PAB. 1.1			100% of fair market value, up to any applicable statutory limit	
	Men's Clothing Line from Schedule A/B: 11.1	\$500.00	•	\$500.00	Va. Code Ann. § 34-26(4)
				100% of fair market value, up to any applicable statutory limit	
	Cash Line from Schedule A/B: 16.1	\$200.00		\$200.00	Va. Code Ann. § 34-4
				100% of fair market value, up to any applicable statutory limit	
	Checking: United Bank Line from Schedule A/B: 17.1	\$4,500.00		\$4,500.00	Va. Code Ann. § 34-4
				100% of fair market value, up to any applicable statutory limit	
	Thrift Saving Plan: Thrift Savings Line from Schedule A/B: 21.1	\$110,026.09		\$110,026.09	Va. Code Ann. § 34-34
				100% of fair market value, up to any applicable statutory limit	
	Pension: United States Postal Service Pension	Unknown		\$0.00	Va. Code Ann. § 34-34
	Line from Schedule A/B: 21.2			100% of fair market value, up to any applicable statutory limit	
	Group Term Life Insurance Policy Note: Policy is through Debtor's	\$1.00		\$1.00	Va. Code Ann. §§ 38.2-3339, 51.1-510
	Employer Line from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	
	GPM Life Line from Schedule A/B: 31.2	\$3,884.95		\$3,884.95	Va. Code Ann. § 38.2-3122
				100% of fair market value, up to any applicable statutory limit	
	Potential funds due to Debtor unknown at the time of filing,	\$1.00		\$0.00	Va. Code Ann. § 34-4
	including but not limited to state and federal income tax refunds, possible garnishment funds, lottery proceeds, and inheritance. Line from Schedule A/B: 35.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every : ■ No □ Yes. Did you acquire the property covere □ No □ Yes	3 years after that for ca	ises fi	,	,

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Fill	in this informat	tion to identify you	ır case:			
Deb	otor 1	Steven Keith Sr	nith			
	-	First Name	Middle Name Last Name			
	otor 2 use if, filing)	First Name	Middle Name Last Name			
Unit	ed States Banki	uptcy Court for the:	WESTERN DISTRICT OF VIRGINIA			
Cas (if kno	e number				_	if this is an led filing
∩ff	icial Form	106D				
			Who Have Claims Secure	d by Propert	V	12/15
<u> </u>	nedule D	. Creditors	Wild Have Claims Secure	d by Fropert	<u>y</u>	12/13
			If two married people are filing together, both are e out, number the entries, and attach it to this form. (
	oer (if known).					
	_′	ve claims secured by	, , , ,	Zavala ava sa alla la manta a d	a man and a so their famous	
	_		his form to the court with your other schedules. Y	rou nave notning else t	o report on this form.	
		l of the information	below.			
Pari		Secured Claims		Column A	Column B	Column C
for e	ach claim. If more	than one creditor has	more than one secured claim, list the creditor separatel a particular claim, list the other creditors in Part 2. As	Amount of claim	Value of collateral	Unsecured
muc	h as possible, list t	he claims in alphabeti	cal order according to the creditor's name.	Do not deduct the value of collateral.	that supports this claim	portion If any
2.1	BB & T		Describe the property that secures the claim:	\$20,025.00	\$11,625.00	\$8,400.00
	Creditor's Name		2014 Ford Focus 48,000 miles NADA: \$11,625.00			
	Po Box 1847	7	As of the date you file, the claim is: Check all that			
	Wilson, NC		apply. □ Contingent			
	Number, Street, Cit	y, State & Zip Code	Unliquidated			
Wha	o owes the debt	Charle and	☐ Disputed Nature of lien. Check all that apply.			
_	Debtor 1 only	: Check one.	☐ An agreement you made (such as mortgage or se	ecured		
_	Debtor 2 only		car loan)	, ou. ou		
	Debtor 1 and Debto	or 2 only	■ Statutory lien (such as tax lien, mechanic's lien)			
	At least one of the	debtors and another	☐ Judgment lien from a lawsuit			
	Check if this clain community debt	n relates to a	Other (including a right to offset)			
		Opened 10/14 Last				
		Active				
Date	e debt was incurre	ed 8/15/16	Last 4 digits of account number 1001			
2.2	Chasa Mta		Describe the property that secures the claim:	\$301,358.00	\$395,000.00	\$0.00
2.2	Chase Mtg Creditor's Name		1333 Middle River Road	Ψ301,336.00	φ393,000.00	φυ.υυ
			Stanardsville, VA 22973 Greene			
			County Tax Map No.: 20 A 6E			
			CTA: \$408,700.00			
			Current Listing Price: \$395,000.00			
			Note: Debtor and his ex-wife are on			
			the Deed to the real estate. Debtor has had th home listed for			
	Po Box 2469	36	As of the date you file, the claim is: Check all that			
	Columbus, (-	apply. Contingent			
		y, State & Zip Code	☐ Unliquidated			
			☐ Disputed			
Who	o owes the debt	? Check one.	Nature of lien. Check all that apply.			

Official Form 106D

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Debtor 1 Steven Kei	th Smith			Case number (if know)				
First Name	Middle N	ame Last Name		, ,		-		
☐ Debtor 1 only ☐ Debtor 2 only		☐ An agreement you made (such as car loan)	mortgage or se	ecured				
☐ Debtor 1 and Debtor 2 of At least one of the debtor.	,	☐ Statutory lien (such as tax lien, me☐ Judgment lien from a lawsuit	echanic's lien)					
Check if this claim relicommunity debt		Other (including a right to offset)	Deed of T	rust				
Date debt was incurred	Opened 08/11 Last Active 7/15/16	Last 4 digits of account num	nber <u>5510</u>					
2.3 Union Bank & 1	Γrust	Describe the property that secures	the claim:	\$71,344.00	\$395,000.00	\$0.00		
Creditor's Name		1333 Middle River Road Stanardsville, VA 22973 Gr County Tax Map No.: 20 A 6E CTA: \$408,700.00 Current Listing Price: \$395, Note: Debtor and his ex-wif	000.00					
24010 Partnership		the Deed to the real estate. has had th home listed for As of the date you file, the claim is:						
Boulevard Ruther Glen, V	A 22546	apply. Contingent						
Number, Street, City, Sta	ate & Zip Code	Unliquidated						
Who owes the debt? Ch	neck one.	☐ Disputed Nature of lien. Check all that apply.						
☐ Debtor 1 only ☐ Debtor 2 only		☐ An agreement you made (such as car loan)	mortgage or se	ecured				
Debtor 1 and Debtor 2 only		☐ Statutory lien (such as tax lien, me	echanic's lien)					
At least one of the debtors and another		☐ Judgment lien from a lawsuit						
Check if this claim relacement	ates to a	Other (including a right to offset)	Deed of T	rust				
Date debt was incurred	Opened 07/08 Last Active 7/25/16	Last 4 digits of account num	nber <u>7171</u>					
	-	Column A on this page. Write that nun		\$392,727.	00			

\$392,727.00 Write that number here:

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the eft. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim Priority amount								•			
Debtor 2 Spouse It, filing) First Name Middle Name Last Na	Fi	Il in this information to identify	your case:								
Debtor 2 Square in filing) Frest Namo Middle Namo Last Name Last Name Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 2/15 Sea soumplete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts or unexpired leases that could result in a claim. Also list executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule Alts: Property (Official Form 106A/B) and on Schedule 6: Executory Contracts and Unexpired Leases (Official Form 1066). Do not include any preditors with partially contracted claims. Secured by Property, If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the eff. Attach the Continuation Page of this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your ame and case number (if known). Part 1. List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim listed, identify what you of claim it. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. In the claim here and show both priority unsecured claims, fill out the Continuation Page of Part 1. If more than one predior has more than one predior has more than none priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the directions in a laphabetical order according to the creditor's name. If you have no other has not a continuation Page of Part 1. If more than one creditor holds an apricular claim, list the direction in listed, the claim is claim has bot	De	ebtor 1 Steven Keitl	n Smith								
United States Bankruptcy Court for the: WESTERN DISTRICT OF VIRGINIA Case number (if known) Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as post lakes to be of readilities with PRIORITY faints and Part 2 for creditors with NONPRIORITY claims. List the other party in Schedule Of Executory Contracts and Unexpired Leases (Official Form 1060). Post in controlled any creditors with party of the Case (Official Form 1060). The controlled any creditors with party of the Case (Official Form 1060). The controlled any creditors with party of the Case (Official Form 1060). The controlled any creditors with party of the Case (Official Form 1060). The controlled any creditors with party of the Case (Official Form 1060). The controlled any creditors with party of the Case (Official Form 1060). The controlled any creditors with party of the Case (Official Form 1060). The controlled any creditors with party of the Case (Official Form 1060). The controlled any creditors who have claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the official form 1060. The controlled any creditors with party of the case (Official Form 1060). The controlled any creditors with party of the case (Official Form 1060). The controlled any creditors in Party of the Party on the Party of the Party of the Party of the Case (Official Form 1060). The Case of the Case of the Case official form 1060) and the Case of the Case official form 1060. The Case of the Case of the Case official form 1060 and the Case of the Case			Mid	dle Name	Last Name	•					
Case number (if lower) Check if this is an amended filling			Mid	dle Name	Last Name	•					
Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts or with partially secured claims that are listed in Schedule 6. Executory Contracts and Unexpired Leases (Official Form 1066.) Do not include any creditors with partially secured claims that are listed in Schedule 6. Executory Contracts and Unexpired Leases (Official Form 1066.) Do not include any creditors with partially secured claims that are listed in Schedule 6. Executory Contracts and Unexpired Leases (Official Form 1066.) Do not include any creditors with partially secured claims that are listed in Schedule 6. Executory Contracts and Unexpired Leases (Official Form 1064.) Do not include any creditors with partially secured claims that are listed in Schedule Dr. Creditors with Priority and contract on the top of any additional pages, write your name and case number (if known). 1. Do any creditors have priority unsecured claims against you? 1. No. Go to Part 2. 1. Example 1. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority amounts. As much as possible, list the claims in alphabetela order according to the creditor's name. If you have more than two priority unsecured claims, lift out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. 1. In the creditor is the claim is listed, identify what type of claim, see the instructions for this form in the instruction booklet.) 1. Internal Revenue Service 1. Last 4 digits of account number 7910 2. Show incurred the debt? Check one. 2. Contingent 2. C	Ur	nited States Bankruptcy Court for	the: WESTE	RN DISTRICT OF VIRO	SINIA						
Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims are acomplete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to recently contracts or unserprised leases that could result in a calim. Also list executory contracts on Schedule A/B: Property (Official Form 108G). Do not include any creditors with partially secured claims that are listed in Schedule 6: Executory Contracts and Unexpired Leases (Official Form 108G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property, If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the eff. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it. If a claim has been priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, lif out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. Internal Revenue Service Last 4 digits of account number 7910 \$1.00 \$1.00 \$0.00 Priority Creditor's Name PO Box 7346 Philadelphia, PA 19101-7346 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 and Debto	Ca	ase number									
Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule 48: Property (Official Form 106A/B) and on Schedule 6: Executory Contracts and Unexpired Leases (Official Form 106A/B) and on Schedule 0: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the fact, Attach the Continuation Page to this page, If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims against you? No. Go to Part 2. Yes. 1. Is a creditor has more than one priority unsecured claim. For each claim listed, identify what type of claim is. If a cleim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts, list the claims in alphabetical order according to the creditors anneal. If you have more than two priority unsecured claims. For each claim listed, identify what type of claim is. If a claim has both priority and nonpriority amounts, list the claims in alphabetical order according to the creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Priority Creditor's Name PO Box 7346 Philadelphia, PA 19101-7346 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Type of PRIORITY unsecured claims Taxes and certain other debts you owe the government Taxes and certain other debts you owere intoxicated Priority Creditor's Name Chec	(if k	known)									ın
Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to my executory contracts or unexpired leases that could result in a claim. Also list executory contracts on contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule 6: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who have claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the eff. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 1. List all of your priority unsecured claims aboth priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditors name. If you have more than two priority unsecured claims. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Priority Creditors Name PO Box 7346 Number Street City State Zip Code Who incurred the debt? Check one. Contingent Debtor 1 and Debtor 2 only Disputed Doebtor 2 only Disputed Type of PRIORITY unsecured claim: Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Type of PRIORITY unsecured claims. To	∩f	ficial Form 106F/F									
Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party in y accurdory contracts on schedule Als. Property (Official Form 1966). Do not include any creditors with partially secured claims that are listed in Schedule 6: Executory Contracts and Unexpired Leases (Official Form 1966). Do not include any creditors with partially secured claims that are listed in Schedule 0: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entires in the boxes on the eft. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2: Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Internal Revenue Service Priority Creditor's Name PO Box 7346 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Disputed Type of PRIORITY unsecured claim: Taxes and certain other debts you owe the government I claims for death or personal injury while you were intoxicated			rs Who Ha	ve Unsecured	Claims	3				12/1	5
1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Internal Revenue Service Priority Creditor's Name PO Box 7346 Philladelphia, PA 19101-7346 Number Street City State Zip Code Who incurred the debt? Check one. Contingent Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Contingent Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Taxes and certain other debts you owe the government Taxes and certain other debts you were intoxicated Notice ONLY NOTICE ONLY	Sch Sch eft.	nedule G: Executory Contracts and nedule D: Creditors Who Have Clain . Attach the Continuation Page to t	Unexpired Lease ms Secured by Pro	s (Official Form 106G). Do operty. If more space is n	o not inclu eeded, co	de any cre py the Part	ditors with partially s	secured clai number the	ims that a entries in	re listed in the boxe	n s on the
No. Go to Part 2.	Pa	rt 1: List All of Your PRIOR	ITY Unsecured	Claims							
Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Internal Revenue Service Last 4 digits of account number 7910 \$1.00 \$1.00 \$0.00 Priority Creditor's Name PO Box 7346 Philadelphia, PA 19101-7346 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Type of PRIORITY unsecured claim: Taxes and certain other debts you owe the government steed of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No TOTICE ONLY	1.	Do any creditors have priority un	secured claims a	gainst you?							
2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Internal Revenue Service Priority Creditor's Name PO Box 7346 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Type of PRIORITY unsecured claim: Check if this claim is for a community debt is the claim subject to offset? No Yes NOTICE ONLY Total claim Priority and nonpriority amounts. As much as possible, the creditors aparately for each claim. For each claim listed, identify and nonpriority and nonpriority and nonpriority amounts. As much as possible, the creditors in Part 3. Total claim Priority Nonpriority No		☐ No. Go to Part 2.									
identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Internal Revenue Service		Yes.									
Internal Revenue Service Priority Creditor's Name PO Box 7346 Philadelphia, PA 19101-7346 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No No Other. Specify NOTICE ONLY S1.00 \$1.	2.	identify what type of claim it is. If a possible, list the claims in alphabeti	claim has both prior cal order according	rity and nonpriority amounts g to the creditor's name. If y	s, list that c ou have m	laim here a	nd show both priority a	and nonprior	ity amount	s. As much	n as
Internal Revenue Service Priority Creditor's Name PO Box 7346 Philadelphia, PA 19101-7346 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No No Yes Last 4 digits of account number 7910 \$1.00 \$1.00 \$0.00		(For an explanation of each type of	claim, see the instr	ructions for this form in the	instruction	booklet.)	Total claim	•			rity
PO Box 7346 Philadelphia, PA 19101-7346 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes When was the debt incurred? Men was the debt incurred? As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply Monitoring in the claim is: Check all that apply As of the date you file, the claim is: Check all that apply Monitoring in the	2.1	Internal Revenue Serv	ice	Last 4 digits of accoun	it number	7910	\$1.00	umount	\$1.00	amount	\$0.00
Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt ls the claim subject to offset? No Yes As of the date you file, the claim is: Check all that apply Contingent Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated No NOTICE ONLY		PO Box 7346	4.7040	When was the debt inc	urred?			-			
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Type of PRIORITY unsecured claim: At least one of the debtors and another Debtor 1 is the claim is for a community debt Is the claim subject to offset? No Yes NOTICE ONLY				As of the date you file,	the claim	is: Check a	all that apply				
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes □ Obstract Unique Disputed Type of PRIORITY unsecured claim: □ Domestic support obligations □ Taxes and certain other debts you owe the government □ Claims for death or personal injury while you were intoxicated □ Other. Specify ■ NOTICE ONLY		Who incurred the debt? Check of	one.	☐ Contingent							
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes □ Other. Specify ■ NOTICE ONLY		Debtor 1 only		☐ Unliquidated							
☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ☐ No ☐ Yes ☐ Obmestic support obligations ☐ Taxes and certain other debts you owe the government ☐ Claims for death or personal injury while you were intoxicated ☐ Other. Specify ☐ NOTICE ONLY		Debtor 2 only		Disputed							
☐ Check if this claim is for a community debt Is the claim subject to offset? ☐ No ☐ Yes ☐ Check if this claim is for a community debt ☐ Taxes and certain other debts you owe the government ☐ Claims for death or personal injury while you were intoxicated ☐ Other. Specify ☐ NOTICE ONLY		Debtor 1 and Debtor 2 only		Type of PRIORITY unse	ecured cla	im:					
Is the claim subject to offset? ☐ Claims for death or personal injury while you were intoxicated ☐ No ☐ Other. Specify ☐ Yes ☐ NOTICE ONLY		At least one of the debtors and	another	☐ Domestic support ob	ligations						
Is the claim subject to offset? ☐ Claims for death or personal injury while you were intoxicated ☐ No ☐ Other. Specify ☐ Yes ☐ NOTICE ONLY		☐ Check if this claim is for a	ommunity debt	Taxes and certain otl	her debts y	ou owe the	government				
☐ Yes ———————————————————————————————————											
- WOTICE ONE!											
		⊔ Yes									

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Debto	or 1 Steven Keith Smith		Case number (if know)					
2.2	Virginia Department of Taxation Priority Creditor's Name Bankruptcy Unit PO Box 2156 Picture and VA 22240 2456	Last 4 digits of account number 79 When was the debt incurred?	\$1.00	\$1.00 \$0.00				
	Richmond, VA 23218-2156 Number Street City State Zlp Code	As of the date you file, the claim is:	Check all that apply					
1	Who incurred the debt? Check one.	Contingent	onook all that apply					
-	Debtor 1 only	Unliquidated						
ı	Debtor 2 only	Disputed						
ı	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:						
I	\square At least one of the debtors and another	☐ Domestic support obligations						
1	☐ Check if this claim is for a community debt Is the claim subject to offset? No ☐ Yes	■ Taxes and certain other debts you □ Claims for death or personal injury □ Other. Specify NOTICE ONL Income Tax	while you were intoxicated					
Part 2	List All of Your NONPRIORITY Unsecur	ed Claims						
	o any creditors have nonpriority unsecured claims							
	No. You have nothing to report in this part. Submit th	is form to the court with your other sche	dules.					
	Yes.	,						
4. Li ur th	ist all of your nonpriority unsecured claims in the a nsecured claim, list the creditor separately for each cla an one creditor holds a particular claim, list the other cart 2.	im. For each claim listed, identify what t	pe of claim it is. Do not list claim	ns already included in Part 1. If more ms fill out the Continuation Page of				
				Total claim				
4.1	Barclays Bank Delaware Nonpriority Creditor's Name	Last 4 digits of account number	8899	\$5,284.00				
	Po Box 8801 Wilmington, DE 19899	When was the debt incurred?	Opened 04/09 Last Ac 8/22/16	tive				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply					
	■ Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only							
	\square At least one of the debtors and another							
	Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims						
	■ No	g plans, and other similar debts						
	Yes	■ Other Specify Credit Card						

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Chase Card	Last 4 digits of account number	2719	\$6,792			
Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 08/07 Last Active 8/21/16				
Number Street City State Zlp Code	As of the date you file, the claim	As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one.						
■ Debtor 1 only	☐ Contingent					
☐ Debtor 2 only	☐ Unliquidated					
☐ Debtor 1 and Debtor 2 only	☐ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
☐ Check if this claim is for a community	☐ Student loans					
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
☐ Yes	■ Other. Specify Credit Card	I				

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				1	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	2.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	2.00
				7	Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.		6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	12,076.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	12,076.00

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Fill in this infor	Fill in this information to identify your case:							
Debtor 1	Debtor 1 Steven Keith Smith							
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States B	ankruptcy Court for the:	WESTERN DISTRICT (OF VIRGINIA					
Case number								
(if known)								

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code

State what the contract or lease is for

2.1 Countryside Self Storage 14790 Spotswood Trail Ruckersville, VA 22968 **Storage Unit Lease**

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Fill in th	is information to identify your	case:			
Debtor 1		th			
Dobtor 2	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if,		Middle Name	Last Name		
United S	tates Bankruptcy Court for the:	WESTERN DISTRICT C	F VIRGINIA		
Case nu	mber				
(if known)					☐ Check if this is an
					amended filing
Officia	al Form 106H				
Sche	dule H: Your Cod	ebtors			12/15
1. D N Y 2. W Arize N Y 3. In C in lii Forr	ne and case number (if known) o you have any codebtors? (If o es lithin the last 8 years, have you ona, California, Idaho, Louisiana, o. Go to line 3. es. Did your spouse, former spou olumn 1, list all of your codebt ne 2 again as a codebtor only i m 106D), Schedule E/F (Official Column 2.	Answer every question. you are filing a joint case, of the lived in a community property Nevada, New Mexico, Publisher, or legal equivalent lived ors. Do not include your fithat person is a guaranter.	do not list either spouse as operty state or territory? erto Rico, Texas, Washing with you at the time?	s a codebtor. (Community proper gton, and Wisconsin. your spouse is filir ire you have listed to go. Use Schedule D.	ng with you. List the person shown the creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Zi	P Code		Column 2: The cr Check all schedul	editor to whom you owe the debt es that apply:
3.1	Carolyn Ann Dickerson 1082 Garth Road Stanardsville, VA 22973			■ Schedule D, □ Schedule E/F □ Schedule G Chase Mtg	, line
3.2	Carolyn Ann Dickerson 1082 Garth Road Stanardsville, VA 22973			■ Schedule D, □ Schedule E/F □ Schedule G Union Bank &	, line

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Fill	in this information to identify your ca	ase:							
	otor 1 Steven Keitl								
	otor 2				_				
Uni	ted States Bankruptcy Court for the	: WESTERN DISTRICT	OF VIRGINIA		_				
	se number						ded filing nent sho	g owing postpetition he following date	
O	fficial Form 106l					MM / DD		no ronowing date	•
	chedule I: Your Inc	ome				WIWI 7 DD			12/1
sup spo atta	as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not filing w	ng jointly, and your ith you, do not include	spouse i ude inforr	s livi natio	ng with you, in on about your s	clude in pouse. I	formation abou If more space is	t your needed,
1.	Fill in your employment information.		Debtor 1			Debto	2 or no	on-filing spouse	
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	■ Employed			□ Em	☐ Employed		
		Employment status	☐ Not employed	☐ Not employed			employ	ed	
		Occupation	Clerk						
	Include part-time, seasonal, or self-employed work.	Employer's name	United States F	Postal Se	ervic	e			
	Occupation may include student or homemaker, if it applies.				\				
		How long employed t	here? 31 Yea	ırs					
Par	t 2: Give Details About Mor	nthly Income							
	mate monthly income as of the dause unless you are separated.	ate you file this form. If	you have nothing to	report for	any li	ne, write \$0 in t	ie space	e. Include your no	n-filing
•	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	on for all e	emplo	yers for that per	son on t	he lines below. If	you need
						For Debtor 1		Debtor 2 or n-filing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	6,614.00	_ \$_	N/A	_
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	N/A	-
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	6,614.00	\$	N/A	

Page 43 of 55 Document Debtor 1 Steven Keith Smith Case number (if known) For Debtor 2 or For Debtor 1 non-filing spouse Copy line 4 here 6,614.00 \$ N/A List all payroll deductions: Tax, Medicare, and Social Security deductions 5a. 1,590.00 N/A 5b. Mandatory contributions for retirement plans 5b. \$ 0.00 N/A 5c. Voluntary contributions for retirement plans 5c. 276.00 N/A Required repayments of retirement fund loans 5d. 5d. \$ 0.00 N/A 5e. Insurance 5e. 373.00 N/A 5f. **Domestic support obligations** 5f. 0.00 N/A 5g. **Union dues** 5g. 46.00 N/A 5h. Other deductions. Specify: 5h.+ \$ \$ 0.00 N/A Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. 2,285.00 N/A Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. 7. N/A 4,329.00 List all other income regularly received: Net income from rental property and from operating a business, profession, or farm

		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total			_					
		monthly net income.	8a.			.00	\$		N/A	
	8b.	Interest and dividends	8b.	•	\$0	.00	\$		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce	it							
		settlement, and property settlement.	8c.		\$ 0.	.00	\$		N/A	
	8d.	Unemployment compensation	8d.			.00	\$		N/A	
	8e.	Social Security	8e.		\$ 0.	.00	\$		N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	ee 8f.		\$ 0.	.00	\$		N/A	
	8g.	Pension or retirement income	— 8g.			.00	\$		N/A	
	8h.	Other monthly income. Specify: Estimated Tax Refunds	8h.	.+		.00	+ \$		N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	50.	.00	\$		N/A	<u> </u>
10.	Calc	ulate monthly income. Add line 7 + line 9.	10.	\$	4,379.00	+ \$		N/A	= \$	4,379.00
	Add t	he entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			•					•
11.	Include other	e all other regular contributions to the expenses that you list in <i>Schedul</i> de contributions from an unmarried partner, members of your household, you friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are notify:	ır depe		.,		,	Schedule 11.		0.00
12.	Write	Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies								4,379.00
13.	Do y∙	ou expect an increase or decrease within the year after you file this form No.	n?						Combir monthly	ed / income
		Yes. Explain:								
	_	·								

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Fill	in this informa	tion to identify yo	our case.			1			
Deb		Steven Keith				Ch	eck if this is:		
DCD	101 1	Steven Keiti	ı əmmi					ed filing	
	tor 2 ouse, if filing)								wing postpetition chapter the following date:
``			MEST						
Unit	ed States Bankr	uptcy Court for the	: WESTE	ERN DISTRICT OF VIRGIN	NIA		MM / DD /	YYYY	
	e number nown)								
Of	fficial Fo	rm 106J							
Sc	chedule	J: Your	Exper	ises					12/1
info	rmation. If m		eded, atta	. If two married people ar ch another sheet to this n.					
Par		ibe Your House	hold						
1.	Is this a join								
	■ No. Go to		in a conar	ate household?					
	□ res. Doe		iii a sepai	ate nousenoid?					
			st file Offici	al Form 106J-2, Expenses	for Separate House	ehold of De	ebtor 2.		
2.	Do you have	e dependents?	■ No						
	Do not list Do	•	■ No	Fill out this information for	Dependent's relat	ionship to	Depend	lent's	Does dependent
	Debtor 2.	obtor runa	□ res.	each dependent	Debtor 1 or Debto		age		live with you?
	Do not state								□ No
	dependents	names.							☐ Yes
									□ No □ Yes
									□ No
									□ Yes
									□ No
									☐ Yes
3.		enses include f people other t	han	No					
		d your depende		Yes					
Par	t 2: Estim	ate Your Ongoi	na Monthl	v Expenses					
Est exp	imate your ex	penses as of yo	our bankrı	uptcy filing date unless y y is filed. If this is a supp					
the	value of such	n assistance an		government assistance i			v		
(Off	ficial Form 10	61.)					Ť	our exp	C113C3
4.		or home owners		ses for your residence. I r lot.	nclude first mortgag	e 4.	\$		1,500.00
	If not includ	led in line 4:							
	4a. Real e	estate taxes				4a.	\$		0.00
		rty, homeowner's	s, or renter	's insurance		4b.			25.00
				ıpkeep expenses		4c.	· —		50.00
_		owner's associat				4d.			0.00
5.	Additional n	nortgage payme	ents for yo	our residence, such as ho	me equity loans	5.	Ф		0.00

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Deb	tor 1 Steven Keith Smith	Case num	nber (if known)	
6.	Utilities:			
	6a. Electricity, heat, natural gas	6a.	\$	250.00
	6b. Water, sewer, garbage collection	6b.	\$	30.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	325.00
	6d. Other. Specify:	6d.	\$	0.00
7.	Food and housekeeping supplies	7.	\$	350.00
8.	Childcare and children's education costs	8.	\$	0.00
9.	Clothing, laundry, and dry cleaning	9.	\$	125.00
10.	Personal care products and services	10.	\$	25.00
11.		11.	\$	50.00
12.	Transportation. Include gas, maintenance, bus or train fare.	10	¢.	250.00
40	Do not include car payments.	12.	·	
	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	· ·	100.00
	Charitable contributions and religious donations	14.	\$	0.00
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.	·	0.00
	15c. Vehicle insurance	15c.		90.00
	15d. Other insurance. Specify:	15d.	· -	0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.			0.00
	Specify: Personal Property Tax	16.	\$	50.00
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	370.00
	17b. Car payments for Vehicle 2	17b.	\$	0.00
	17c. Other. Specify:	17c.	\$	0.00
	17d. Other. Specify:	17d.	\$	0.00
18.	Your payments of alimony, maintenance, and support that you did not report as			0.00
	deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.		0.00
19.	Other payments you make to support others who do not live with you.		\$	0.00
	Specify:	19.		
20.	Other real property expenses not included in lines 4 or 5 of this form or on Scho			0.00
	20a. Mortgages on other property	20a. 20b.		0.00
	20b. Real estate taxes		·	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	· -	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	·	0.00
0.4	20e. Homeowner's association or condominium dues	20e.	· -	0.00
21.	Other: Specify: Emergency Fund	21.	+\$	50.00
22.	Calculate your monthly expenses			
	22a. Add lines 4 through 21.		\$	3,640.00
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	22c. Add line 22a and 22b. The result is your monthly expenses.		\$	3,640.00
23.	Calculate your monthly net income.			
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	4,379.00
	23b. Copy your monthly expenses from line 22c above.	23b.		3,640.00
	• • • • • • • • • • • • • • • • • • • •			
	23c. Subtract your monthly expenses from your monthly income.	20	6	730.00
	The result is your monthly net income.	23c.	D	739.00

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

☐ Yes.

Explain here: Expenses detailed herein are estimated as Debtor will be surrendering his home and moving into a rental home.

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Fill in this infor	mation to identify your	case:			
Debtor 1	Steven Keith Smi	th			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT O	OF VIRGINIA		
Case number					
(if known)					Check if this is an amended filing
					J
O#: a: a!	100D				
Official For		امييامانيا ما	Dobtorio Co	h a duda a	
Declara	tion About a	<u>n individuai</u>	Debtor's Sc	neaules	12/15
years, or both. 1	is U.S.C. §§ 152, 1341, 1		,	,), or imprisonment for up to 20
Did you pa	ay or agree to pay some	one who is NOT an attor	ney to help you fill out ba	ankruptcy forms?	
■ No					
☐ Yes.	Name of person				ruptcy Petition Preparer's Notice, and Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sum	mary and schedules filed	d with this declaration	n and
X /s/ Ste	ven Keith Smith		X		
	n Keith Smith ure of Debtor 1		Signature of I	Debtor 2	
Date	October 3, 2016		Date		

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	uns inionii	ation to identify you	r case:					
Debto	r 1							
		First Name	Middle Name	Last Name				
Debto (Spouse	r 2 if, filing)	First Name	Middle Name	Last Name				
Linitoo	I States Bank	cruptov Court for the	WESTERN DISTRICT O	E VIDGINIA				
United	States Barr	cruptcy Court for the:	WESTERN DISTRICT O	r VIRGINIA				
Case I	number					Observative transport		
(II KIIOWI	')					Check if this is an amended filing		
Offic	cial For	m 107						
Stat	ement o	of Financial	Affairs for Indivi	duals Filing for	Bankruptcy	4/10		
Be as	complete an	d accurate as possi	ble. If two married people	are filing together, both a	are equally responsible for su	pplying correct		
nform	ation. If mo	re space is needed,	attach a separate sheet to		any additional pages, write y			
numbe	er (if known)	. Answer every ques	stion.					
Part 1	Give De	tails About Your Ma	arital Status and Where Yo	u Lived Before				
1. W	hat is your	current marital statu	is?					
_	l Married							
	Not marri	ed						
			lived envelope ether then	where you live new?				
2. D	uring the las	the last 3 years, have you lived anywhere other than where you live now?						
	l No							
	Yes. List	. List all of the places you lived in the last 3 years. Do not include where you live now.						
C	ebtor 1 Pric	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior	Address:	Dates Debtor 2 lived there		
3. W	ithin the las	t 8 years, did you ev	ver live with a spouse or le	gal equivalent in a comm	unity property state or territo	ory? (Community property		
					Rico, Texas, Washington and			
	l _{No}							
		e sure you fill out Sch	hedule H: Your Codebtors (C	Official Form 106H).				
5 40								
Part 2	Explain	the Sources of You	r Income					
Fi	ll in the total	I you have any income from employment or from operating a business during this year or the two previous calendar years? in the total amount of income you received from all jobs and all businesses, including part-time activities. ou are filing a joint case and you have income that you receive together, list it only once under Debtor 1.						
	l Na							
		n the details.						
	165. FIII I	i the details.						
			Debtor 1		Debtor 2			
				Gross income	Sources of income			
			Sources of income Check all that apply.	(before deductions and exclusions)		Gross income (before deductions and exclusions)		
		f current year until for bankruptcy:		(before deductions and	Check all that apply.	(before deductions		

Case 16-62009 Doc 1 Filed 10/03/16 Entered 10/03/16 17:40:44 Desc Main Document Page 48 of 55 Debtor 1 Steven Keith Smith Case number (if known) Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** (before deductions and Check all that apply. Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$82,277.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2015) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$79,209.00 ☐ Wages, commissions, Wages, commissions. (January 1 to December 31, 2014) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income from** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? □ No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? □ No. Go to line 7. Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
BB & T Po Box 1847 Wilson, NC 27894	07/2016, 08/2016, 09/2016 for \$397.00	\$1,191.00	\$20,025.00	☐ Mortgage ■ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other

Document Page 49 of 55 Debtor 1 Steven Keith Smith Case number (if known) **Creditor's Name and Address Total amount** Dates of payment Amount you Was this payment for ... still owe paid Chase Mtg \$5,445.76 \$301,358.00 07/2016, 08/2016 Mortgage Po Box 24696 for \$2,722.88 each ☐ Car Columbus, OH 43224 ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors □ Other **Union First Market Ban** 07/2016, 08/2016. \$906.48 \$71,344.00 Mortgage 24010 Partnership Blvd 09/2016 for ☐ Car Ruther Glen, VA 22546 \$302.16 each ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other_ Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. Insider's Name and Address **Dates of payment Total amount** Amount you Reason for this payment paid still owe 8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address Dates of payment Total amount Amount you Reason for this payment paid still owe Include creditor's name Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο Yes. Fill in the details. Case title Nature of the case Status of the case Court or agency Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Date Value of the property Explain what happened

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Page 50 of 55 Document Debtor 1 Steven Keith Smith Case number (if known) 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No ☐ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Nο Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment Email or website address made Person Who Made the Payment, if Not You **Tucker Griffin Barnes PC** Costs as set forth in Exhibit A to Form 09/2016 \$500.00 307 West Rio Road 2030 Charlottesville, VA 22901 SMorgan@TGBlaw.com

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Debtor 1 Steven Keith Smith

Case number (if known)

17.	promised to help you deal with your creditors Do not include any payment or transfer that you li No	or to make payments to your cred		half pay or transfer any property to anyone who	
	☐ Yes. Fill in the details. Person Who Was Paid Address	Description and value of any p transferred	roperty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus Include both outright transfers and transfers made include gifts and transfers that you have already I No Yes. Fill in the details.	siness or financial affairs? e as security (such as the granting of			
	Person Who Received Transfer Address	Description and value of property transferred		any property or s received or debts xchange	Date transfer was made
	Person's relationship to you				
	Eddins Ford Car Dealerhip	2011 Ford Focus	payoff o outstand trade-in	received the of the ding loan and credit towards tor's current car.	10/2014
19.	Within 10 years before you filed for bankruptc beneficiary? (These are often called asset-prote ■ No □ Yes. Fill in the details.		a self-settled ti	rust or similar device (of which you are a
	Name of trust	Description and value of the p	roperty transfer	red	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Instr	ruments Safe Denosit Boxes and	Storage Units		
	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or chouses, pension funds, cooperatives, association No	were any financial accounts or ins	struments held i		
		ast 4 digits of Type of acc	ount or D	ate account was	Last balance
		instrument	cl m	losed, sold, loved, or ansferred	before closing or transfer
21.	Do you now have, or did you have within 1 year cash, or other valuables? No Yes. Fill in the details.	ar before you filed for bankruptcy,	any safe depos	it box or other deposi	tory for securities,
	Name of Financial Institution	Who else had access to it?	Describe the	contents	Do you still
	Address (Number, Street, City, State and ZIP Code)	Address (Number, Street, City, State and ZIP Code)	20001130 1110	, comonic	have it?
22.	Have you stored property in a storage unit or No Yes. Fill in the details.	a storage unit or place other than your home within 1 year before you filed for bankruptcy?		y?	
	Name of Storage Facility	Who else has or had access	Describe the	contents	Do you still
	Address (Number, Street, City, State and ZIP Code)	to it? Address (Number, Street, City, State and ZIP Code)			have it?
~u:-	000	t of Financial Affaira for Individuals Fili	na far Bankruntau		

Case 16-62009 Doc 1 Filed 10/03/16 Entered 10/03/16 17:40:44 Desc Main Page 52 of 55 Document Steven Keith Smith Case number (if known) Describe the contents Name of Storage Facility Who else has or had access Do you still Address (Number, Street, City, State and ZIP Code) to it? have it? Address (Number, Street, City, State and ZIP Code) Household Goods and **Countryside Self Storage** □ No 14790 Spotswood Trail Furnishings, Clothing, Yes Ruckersville, VA 22968 **Paperwork** Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes. Fill in the details. Owner's Name Where is the property? Describe the property Value (Number, Street, City, State and ZIP Address (Number, Street, City, State and ZIP Code) Code) Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it 25. Have you notified any governmental unit of any release of hazardous material? Nο Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Nο Yes. Fill in the details. **Case Title** Court or agency Nature of the case Status of the Case Number Name case Address (Number, Street, City, State and ZIP Code)

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time

☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)

Debtor 1

П

Case 16-62009 Doc 1 Filed 10/03/16 Entered 10/03/16 17:40:44 Desc Main Page 53 of 55 Document Debtor 1 Steven Keith Smith Case number (if known) ■ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Do not include Social Security number or ITIN. Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Steven Keith Smith Signature of Debtor 2 Steven Keith Smith Signature of Debtor 1 Date October 3, 2016 **Date** Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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United States Bankruptcy Court Western District of Virginia

		Western District of Virginia			
In re	Steven Keith Smith		Case No.		
		Debtor(s)	Chapter	13	
VERIFICATION OF CREDITOR MATRIX					
The ab	ove-named Debtor hereby verifies	s that the attached list of creditors is true and cor	rect to the best	of his/her knowledge.	
Date:	October 3, 2016	/s/ Steven Keith Smith			
		Steven Keith Smith			

Signature of Debtor

Smith, Steven -

BARCLAYS BANK DELAWARE PO BOX 8801 WILMINGTON, DE 19899

BB & T PO BOX 1847 WILSON, NC 27894

CAROLYN ANN DICKERSON 1082 GARTH ROAD STANARDSVILLE, VA 22973

CHASE CARD PO BOX 15298 WILMINGTON, DE 19850

CHASE MTG PO BOX 24696 COLUMBUS, OH 43224

INTERNAL REVENUE SERVICE PO BOX 7346 PHILADELPHIA, PA 19101-7346

UNION BANK & TRUST 24010 PARTNERSHIP BOULEVARD RUTHER GLEN, VA 22546

VIRGINIA DEPARTMENT OF TAXATION BANKRUPTCY UNIT PO BOX 2156 RICHMOND, VA 23218-2156